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TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

		Application No.	10/718,742
		Filing Date	November 21, 2003
		First Named Inventor	Todd Lewis
		Art Unit	2835
		Examiner Name	Chang, Yean Hsi
Total Number of Pages in This Submission	23	Attorney Docket Number	4676P046

ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Response <input checked="" type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s). <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input checked="" type="checkbox"/> Information Disclosure Statement <input checked="" type="checkbox"/> PTO/SB/08 <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Basic Filing Fee <input type="checkbox"/> Declaration/POA <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):	<div style="border: 1px solid black; padding: 5px; min-height: 100px;"> Return postcard. Statement Under 37 CFR 1.97(e). </div>	
			<input type="checkbox"/> Remarks	

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Thomas C. Webster, Reg. No. 46,154 BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN LLP
Signature	
Date	6/29/06

CERTIFICATE OF MAILING/TRANSMISSION

I hereby certify that this correspondence is being deposited with the United States Postal Service on the date shown below with sufficient postage as first class mail in an envelope addressed to: Mail Stop AF, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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Signature			

Based on PTO/SB/21 (09-04) as modified by Blakely, Sokoloff, Taylor & Zafman (wtr) 1/30/2005.
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EE TRANSMITTAL for FY 2005

Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27.

TOTAL AMOUNT OF PAYMENT (\$ 180.00)

<i>Complete if Known</i>	
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METHOD OF PAYMENT *(check all that apply)*

Check Credit card Money Order None Other (please identify): _____

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee
 Charge any additional fee(s) or underpayment of fee(s) Credit any overpayments
under 37 CFR §§ 1.16, 1.17, 1.18 and 1.20.

FEE CALCULATION

1. EXTRA CLAIM FEES

		Extra Claims	Fee from below	Fee Paid
Total Claims	12	26*	0	x 50.00 = \$0.00
Independent Claims	3	3*	0	x 200.00 = \$0.00
Multiple Dependent				=

Large Entity		Small Entity		Fee Description
Fee Code	Fee (\$)	Fee Code	Fee (\$)	
1202	50	2202	25	Claims in excess of 20
1201	200	2201	100	Independent claims in excess of 3
1203	360	2203	180	Multiple Dependent claim, if not paid
1204	790	2204	395	**Reissue independent claims over original patent
1205	300	2205	150	**Reissue claims in excess of 20 and over original patent
SUBTOTAL (1)				(\$) 0.00

***or number previously paid, if greater. For Reissues, see below*

2. ADDITIONAL FEES

Large Entity	Small Entity
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Fee Description
e filing fee or oath
e provisional filing fee or cover sheet.
specification
ply within first month
ply within second month
ply within third month
ply within fourth month
ply within fifth month
al
support of an appeal
al hearing
stitute a public use proceeding
Commissioner
under 37 CFR 1.17(q)
Information Disclosure Stmt
ision after final rejection (37 CFR § 1.17(q))
lant invention to be examined (37 CFR § 1.17(q))

Other fee (specify)

SUBTOTAL (2)

Fee Paid
180.00

180.00

SUBMITTED BY

Complete (if applicable)

SUBMITTED BY		Complete (if applicable)		
Name (Print/Type)	Thomas C. Webster	Registration No. (Attorney/Agent)	46,154	Telephone
Signature				Date

Based on PTO/SB/17 (12-04) as modified by Blakely, Sokoloff, Taylor & Zafman (wir) 12/15/2004.
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